## P.06

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Patr	icia M.	Fedorowyo	2 0	(Depositor's name)
Merc	wn	- TELAKLU	19/	(Signature)
June	23, 20	009	10	(Date)

APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/075,500	02/14/2002	Mark Stephen Amshoff	PU010080	8797

TITLE OF INVENTION: METHOD AND APPARATUS FOR ENHANCED CABLE MODEM OPERATION

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RUSSELL, WANDA Z  2416  725-126000  1. Change of correspondence address or indication of "Foc Address" (37  CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.    "Foe Address" indication (or "Foe Address" Indication form PTO/SB/122) attached.    "Foe Address" indication (or "Foe Address" Indication form PTO/SB/122) attached.    "Foe Address" indication (or "Foe Address" Indication form PTO/SB/122) attached.    "Foe Address" indication (or "Foe Address" Indication form PTO/SB/122) attached.    "Foe Address" indication (or "Foe Address" Indication form PTO/SB/122) attached.    "Toe Address" indication (or "Foe Address" Indication form PTO/SB/122) attached.    "Toe Address" indication (or "Foe Address" Indication form PTO/SB/122) attached.    "Toe Address" indication attached of Country or Bell of the patient of the patient.    "Toe Address" indication or "Foe Address" indication form provided provided in the patient of the patient.    "Toe Address" indication of "Foe Address" indication for "Foe Address" indication for provided provided in the patient of the patient of the patient.    "Toe Address" indication foe of Country in the patient of the patient of the patient of the patient.    "Toe Address" indication foe of Country in the patient of the patient.   "Toe Bell of the patient of the patient of the patient of the patient." If an assignce is identified below, the document has been fill attached.    "Toe Bell of the patient of the patient." If an assignce is identified below, the document has been fill attached.    "Toe Bell of the patient of the patient." If an assignce is identified below, the document has been fill attached.    "Toe Bell of the patient of the patient." If an assignce is identified below, the document has been fill attached.    "Toe Bell of the patient of the patient." I	nonprovisional	NO	\$1510	\$300	so	\$1810	06/16/2009
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Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.    "Fee Address" indication for "Fee Address" Indication form PTO/SB/122) attached.    "Fee Address" indication for "Fee Address" Indication form PTO/SB/122) attached. Use of a Customer Number is required.    Assigned Name And Residence Data to Be Printed On the Patent (print or type)   PLEASE NOTE: Unless an assigned is identified below, no assigned data will appear on the patent. If an assigned is identified below, the document has been fill recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE    Boulogne—Billancourt, FRANCE     Boulogne—Billancourt, FRANCE     Boulogne—Billancourt, FRANCE     Boulogne—Billancourt, France     Advance Order - # of Copies 4     Boulogne—Billancourt     Advance Order - # of Copies 4     Boulogne—Billancourt     Boulogne—Billan	RUSSELL,	WANDA Z	. 2416	725-126000	,	,	
Boulogne—Billancourt, FRANCE  Please check the appropriate assigned category or categories (will not be printed on the patent): Individual Corporation or other private group entity Govern  4a. The following fee(s) are submitted:    Size Fee	CFR 1.363).  Change of corresp Address form PTO/S PTO/S PTO/SB/47: Rev 03-4 Number is required.  3. ASSIGNEE NAME A PLEASE NOTE: Un recordation as set forter.	pondence address (or Cha B/122) attached. dication (or "Fee Address" 12 or more recent) attach ND RESIDENCE DAT/ less an assignee is identi h in 37 CFR 3.11. Comp	inge of Correspondence Indication form and. Use of a Customer	(1) the names of up to or agents OR, alternative (2) the name of a single registered attorney of a 2 registered patent and listed, no name will be THE PATENT (print or type data will appear on the para substitute for filing and	3 registered patent attern vely, e firm (having as a memb agent) and the names of unities or agents, if no nam printed.  be)  atent. If an assignce is id assignment.	cra 2 PAUL P. p to 3 GUY H. E	KIEL
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5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  NOTE: The Issue Fee and Publication Fee (If required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other painterest as shown by the records of the United States Patent and Trademark Office.	4a. The following fee(s)  Issue Fee  Dublication Fee (N	are submitted:	46	o. Paymoni of Fce(s): (Plea  A check is enclosed.  Payment by credit can	se first reapply any prev	lously paid issue fee sho	wn above)
MARA	NOTE: The Issue Fee an	SMALL ENTITY statu	s. Sec 37 CFR 1.27,	D b. Applicant is no long	er claiming SMALL ENT	TTV signis See 37 CED	1.77(a)(2)
Typed or printed name GUY H. ERIKSEN (609) 734-6807 Registration No. 41,736  This collection of information is required by 37 CFR 1.311. The information is required to obtain or rotain a benefit by the public which is to file (and by the USPTO to propagate of the propagate of the public which is to file (and by the USPTO to propagate of the public which is to file (and	Authorized Signature	GUY H. ERIKS	EN (609) 734-6	5807	Dato June 23	1,736	

an application. Confidentiality is governed by 35 CFR 1.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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June 23		00	(046
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/075,500	02/14/3002	Mark Stephen Amshoff	PU010080	8797
TENTRA DI AIR IN CONTRACTOR AND A CO.				0/7/

TITLE OF INVENTION: METHOD AND APPARATUS FOR ENHANCED CABLE MODEM OPERATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUÉ	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	06/16/2009
EXAM	AINER	ART UNIT .	CLASS-SUBCLASS	]		
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Change of corresp	ondence address (or Cha B/122) uttached.	nge of Correspondence	(1) the names of up to or agents OR, alternation	3 registered patent attem	cys   ROBERT D	SHEDD
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3. ASSIGNEE NAME A	NO RESIDENCE DATA	TO BE PRINTED ON T	THE PATENT (print or typ	<u>c)</u>		
PLEASE NOTE: Unit recordation as set fort	less an assignee is identi h in 37 CFR 3.11. Comp	fied below, no assignee detion of this form is NOT	data will appear on the part of filing an a	nent. If an assignee is ide	entified below, the docu	ment has been filed for
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Please check the appropri	ate assignee category or	categories (will not be pri		Individual Corporatio		entity Government
4a. The following fee(s) a			Payment of Fee(s): (Pleas A check is enclosed.			
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Change in Entity Stat	us (from status indicated	above)		174	18.32 (Cherose an ex	ra copy of this form).
U 8. Applicant claims	SMALL ENTITY Status	. See 37 CFR 1.27.	b. Applicant is no longe	er claiming SMALL ENTI	TY status. See 37 CFR 1	.27(0)(2).
nterest as shown by the re	cords of the United State	red) will not be accepted as Patent and Trudemark (	from snyone other than the	applicant; a registered att	omey or agent; or the ass	rignce or other party in
Authorized Signature		$\varepsilon$		Date June 22	2009	
Typed or printed name	GUY H. ERIKSE	N (609) 734-68	307	Registration No. 41	,736	

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